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SUBJECT: CROATIA SEEKS FUNDING TO CONTINUE AIDS-RELATED ACTIVITIES

ZAGREB 00000952 001.2 OF 003

1.(SBU) Summary: As Global Fund support for Croatia's AIDS programs ends this year, health officials are scrambling to continue funding for testing and treatment as well as education and prevention programs which have been successful in changing preconceptions toward HIV/AIDS patients in this conservative country. Croatia cannot reapply for funding because its GDP exceeds the Global Fund limit. While the number of documented HIV/AIDS cases remains low, Croatia believes it is crucial to continue these programs as the country draws more tourists and transient workers, one possible link to the spread of the disease. HIV/AIDS workers are also seeking to strengthen legislation to end discrimination against those who test positive for HIV. End summary.

Infection rate

12. (U) There are 512 officially documented cases of HIV in Croatia, about .01 percent of the total population (5 million). Of those, 234 have developed into AIDS. People with HIV in Croatia are almost exclusively members of high-risk groups - primarily homo/bisexual men and heterosexual men who have frequent contact with commercial sex workers (these two populations overlap). There are currently nine9 children who were infected by their mothers and 52 known cases of intravenous drug users.

13. (U) Currently the number of people voluntarily seeking testing is five out of every 10,000, according to Iva Jovovic, National HIV/AIDS Advisor of the UN Theme Group on HIV/AIDS in Croatia. Jovovic said that number needs to be 10 out of 10,000 to get a true picture of the number of HIV/AIDS affected people in Croatia. Jovovic added that Croatia has moved into the second generation of HIV surveillance, analyzing behavior and biological research to determine who is at risk for HIV infection.

14. (U) In 2005, 12 new cases of HIV were reported. Dr. Josip Begovac, head of the AIDS unit of the University Hospital for Infectious Diseases, attributes the increase to more voluntary testing, rather than the spread of the disease. However, health officials fear a larger increase is possible

as more transient workers, merchant sailors and tourists travel to Croatia.

Funding

¶5. (SBU) Croatia's health officials and NGOs have been working under a three-year, \$4.5 million grant from the Global Fund to establish testing centers and clinics, treatment, counseling, education and prevention programs. Dr. Dunja Skoko-Poljak, senior advisor in the Ministry of Health, said 10 million Kuna per year (\$1.76 million) is needed to continue all of the programs. She expects the Ministry of Health to maintain at least the 10 clinics established throughout Croatia and the treatment center in Zagreb, but hopes the NGOs will secure their own funding to continue counseling, education and prevention.

¶6. (SBU) A representative from the NGO HUHIV was surprised to hear there was a chance HIV/AIDS NGOs wouldn't be included in future government funding. However, they have also begun looking for outside funds without much luck. One spokesman said the Bill and Melinda Gates Foundation turned down HUHIV's grant application, saying, "Croatia is not a priority."

Centralized care in Zagreb

¶7. (U) Treatment has been available in Zagreb since 1996. Currently there are 220 patients seeking treatment. The 10 testing centers operate in Zagreb (2), Osijek, Zadar, Rijeka, Split, Slavonski Brod,

ZAGREB 00000952 002.2 OF 003

Dubrovnik and Korcula. Once diagnosed, patients are referred to Dr. Begovac in Zagreb for further testing, treatment and medicine. Dr. Begovac keeps a record of all HIV/AIDS cases to be reported to the National Health Insurance, which pays for treatment and medicine. Patients travel up to four times a year for exams and prescriptions. Seventeen of 20 existing drugs are available in Croatia. Health officials said this is adequate. The centralized treatment center helps HIV patients maintain their privacy, Dr. Begovac said, because they don't have to visit neighborhood clinics regularly.

Changing attitudes

¶8. (SBU) Begovac said it's not as easy for AIDS patients to find dentists and doctors to treat them for other ailments because of lingering fear among medical practitioners. Begovac said he is working within the University Hospital and medical community to educate physicians, nurses and dentists about HIV/AIDS. He said the problem remains with older medical professionals and expects it to lessen with time.

¶9. (U) Croatia's attitude has somewhat improved since 2002 when the public and press scandalized Ela and Ina, two girls who were nearly barred from attending public primary school when it became known they were HIV positive. Health officials attribute the positive change to the numerous education and prevention programs run by five NGOs and backing from the Ministry of Public Health. They said testing and treatment is not enough without

community outreach. Since a team of medical experts went to Kutina to explain that Ela's and Ina's classmates wouldn't be in danger of contracting the disease through casual contact, they and a handful of other HIV infected children have been able to attend public schools.

¶10. (U) Educational programs were introduced into middle and high schools nationwide, targeting the age group most likely to become sexually active. School officials resisted at first, mainly due to the influence of the Roman Catholic Church, HUHIV's spokesman said, but now 70 percent allow NGOs to provide HIV/AIDS education programs and materials. The most resistant areas tend to be in Dalmatia where the population is most conservative, HUHIV reports. But even some of those schools have signed on to the Church's own HIV/AIDS education program.

Anti-discrimination legislation

¶11. (U) The UN Theme Group on HIV/AIDS analyzed Croatia's legislation regarding AIDS and anti-discrimination and published a report in June. The analysts said Croatia essentially follows international recommendations regarding testing and privacy but needs to strengthen its regulations in those areas as well as in protecting people with HIV/AIDS and their families from discrimination.

¶12. (U) Although testing is voluntary by law, there are exceptions. Testing is mandatory for blood, organ and tissue donors. It's also mandatory for those seeking positions as crew on aircraft and ships and military and civilian bodyguards. The report also notes that there is discrimination in the workplace in hiring, promoting and treatment of employees who are discovered to have HIV/AIDS.

Working with the Media

¶13. (U) Jovovic said the HIV/AIDS community is making efforts to work with rather than battle the media. People discovered with HIV/AIDS are still big news, but Jovovic said she and her colleagues respond quickly to media inquiries, when appropriate, with factual information. Jovovic said the UN Theme Group has assembled a group of

ZAGREB 00000952 003.2 OF 003

journalists and lawyers to review media coverage of HIV/AIDS in Croatia, with a report to be released in September. They also are sponsoring a journalism competition with an award for the most responsible coverage of HIV/AIDS to be announced in December.

More success stories

¶14. (U) HIV/AIDS workers point to the AIDS tram, painted on the outside with contact information for testing and counseling, as one of their most successful innovations. The tram has been running for a year in Zagreb. HUHIV also publishes a quarterly information bulletin, with a circulation of 10,000 nationwide, including hospitals, clinics and testing centers. The NGOs also organize the annual World AIDS Day on December 1.

¶15. (U) Dr. Skoko-Poljak noted the inroads made into the communities of sex workers and intravenous drug

users. She said many are voluntarily going for testing, accepting condoms and participating in needle exchange programs through outreach workers at churches, local governments, NGOs, and police. She said they are also offering tests in prisons.

DELAWARE